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2012 AUG 13 AM 8: 08

	TAIS HOR LO WA ME OF
u	FEC MAIL CENTER
Committee Name:	
KANSAS HORSE ASSOCIATION	
If registered, FEC ID:	
Today's Date:	
08/08/2012	
Federal Election Commission	
999 E Street, N.W.	
Washington, D.C. 20463	
Re: Form 1, Statement of Organization—U	nlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:		
Quire	Caramante.	Treasurer
()		

12030873322

FEC FORM

STATEMENT OF ORGANIZATION

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FORM 1						STE COS MANI CENTER
NAME OF COMMITTEE (in	n full)	(Check if is changed		Example: If typing, type over the lines.	12FE4M5	- oen Trik
KANSAS	†ORSI	Ę ĄSSOCI	ATIO	y		· <u> </u>
				1 1 1 1 1 1 1 1	<u> </u>	
ADDRESS (number a	ind street)		Ш			
(Check if a						
is changed	,					
			Cl	ry	STATE	ZIP CODE
COMMITTEE'S E-MA	AL ADDRES		_		· ·	
(Check if		KSIIOISea	ISSOCIA	ation@gmail.co		
is change	ю					
COMMITTEE'S WEE	PAGE ADE					
(Check if is change		kansasho	prseas	sociation.tumb	olr,com,	
2. DATE	M /	0 / 1 1 1 1 1 1 1 1 1 1				
3. FEC IDENTIFIC	CATION NU	JMBER	C _	And the startes of th		
4. IS THIS STATE	MENT X	NEW (N)	OR	AMENDED (A)		
I certify that I have	examined the	is Statement and to	the best of	my knowledge and belief i	t is true, correct a	and complete.
Type or Print Name	of Treasurer	Julie Ca	raman	ite		
Signature of Treasur	er	Julie (mac	mante	Date 08"	′ 08° ′ 2012``
NOTE: Submission of				ay subject the person signing SHOULD BE REPORTED W		he penalties of 2 U.S.C. §437g.
. Office Use Only				For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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5.			OMMITTEE				
	Cen	didate	Committee:				
	(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)				
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complinformation below.)	ete the candidate			
	Name Cand			<u> </u>			
		lidate Affiliati	Office Sought: House Senate President	State District			
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	· · · · · ·			
	Name Cand						
	Part	y Con	nmittee:				
	(d)			Democratic, epublican, etc.) Party.			
	Poli	tical A	ction Committee (PAC):				
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a			
		_	Corporation ··· Corporation w/o Capital Stock	Labor Organization			
				•			
			Membership Organization Trade Association	Cooperative			
			In addition, this committee is a Lobbyist/Registrant PAC.				
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)					
			In addition, this committee is a Lobbyist/Registrant PAC.				
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
	Join	t Fund	Iraising Representative:				
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal eandidate.	or more political			
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political			
	Committees Participating in Joint Fundraiser						
		1.					
		2.	FEC ID number C				
		3.	FEC ID number C				
	•	4.		1			

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٧	Vrite or Type Committe	e Name				
k	KANSAS HO	ORSE ASSOCIATION				
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor					
L	lone[]]]		11111			
L						
	Mailing Address					
]-[
		CITY STATE ZIP	CODE			
	Relationship: Co	onnected Organization Affiliated Committee Joint Fundraising Representative Leaders	ship PAC Sponsor			
7.	Custodian of Record books and records.	ds: Identify by name, address (phone number optional) and position of the person in possess	ion of committee			
	Full Name	aula Bacon				
	Mailing Address	1504 S. Houston Street				
		Kaufman TX 75142				
	Title or Position	CITY STATE ZIP	CODE			
	Custodian of	FRecords Telephone number 972 - 824	[1073			
8.	Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).					
	Full Name of Treasurer	ulje Caramante				
	Mailing Address	1504, S. Houston Street	لببب			
		Kaufman TX 75142				
	Title or Position	CITY STATE ZIP	CODE			
	Treasurer	Telephone number [281] - [766]	4040			

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Full Name of Designated Agent	Paula Bacon		
Mailing Address	1504 S. Houston Street		
			1 1 1 1 1 1 1 1 1 1 1
	Kaufman city	J TX STATE	75142 zip code
Title or Position Assistant		number [97	72, - 824, - 1073,
9. Banks or Othe safety deposit b	er Depositories: List all banks or other depositories in which the corpoxes or maintains funds.	nmittee deposits	s funds, holds accounts, rents
Name of Bank,	Depository, etc.		
¡JРMorgan Chase Bank , , , , , , , , , , , , , , , , , , ,			
Mailing Address	1811 Preston Road	1 1 1 1 1	
	<u> </u>		
	[Dallas	_ TX_	75525
	CITY	STATE	ZIP CODE
Name of Bank,	Depository, etc.		
Mailing Address	s		
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		ليا ل	<u> </u>
	CITY	STATE	ZIP CODE

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office **Date of Receipt or Postmarked** Other (Specify): DATE PREPARED